

Provider Walkthrough for Pilot Testing

MaineCare



Agenda

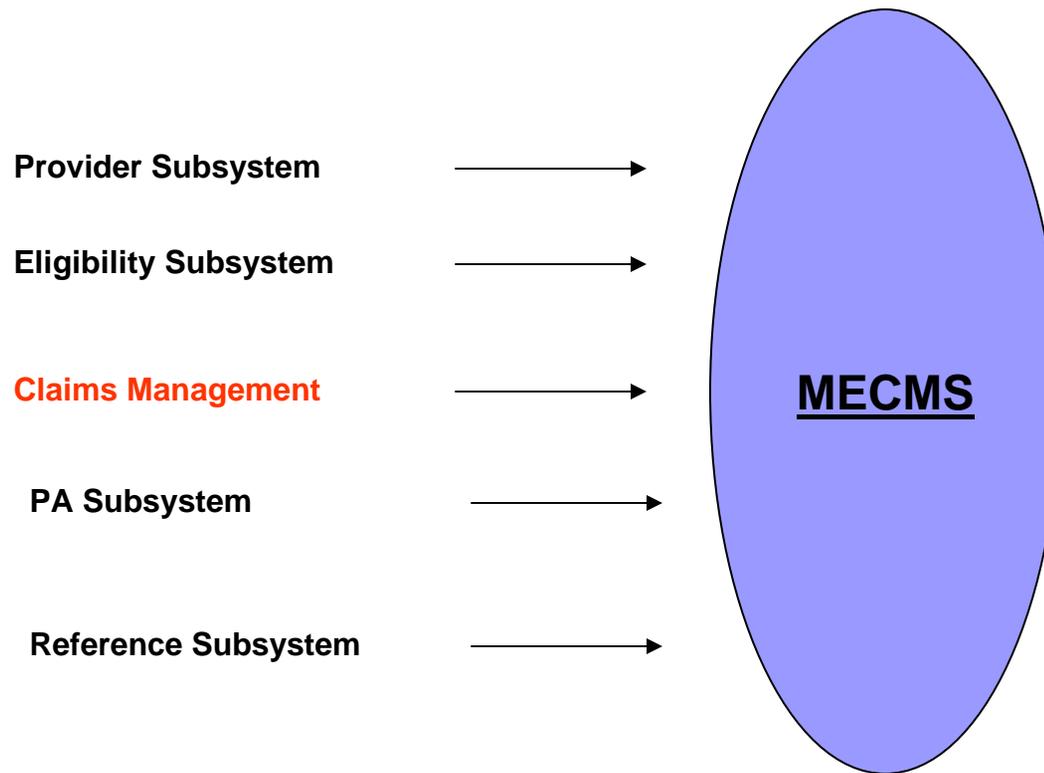
- Registration
- Objectives of the Pilot Phase
- Overview of Provider View for MECMS
- Modes of Claims Submission in MECMS
- Provider roles and activity details
- FAQs
- Summary



Objectives of Pilot Phase

- Initiate participation of the provider community
- Communicate and validate new processes with the provider community
- Validate accuracy of the claims processes in order to facilitate transition to MECMS system
- Initiate transition to HIPAA transactions
- Focus is on claims adjudication business process

Provider View of MECMS Processes



Pilot Focus is on Claims Management Functionality only



Focus: Claims Management

- Claims Submission
 - Active participation of the providers
- Claims Adjudication
 - Internal system activity but critical to ensure correct processing of claims
- Claims Feedback
 - Acknowledgment Process
 - Proprietary file or 997
 - Remittance Advice
 - 835 and/or Paper RA



MECMS Claims Submission Process

- Paper Claims

- Only standard claim forms (HCFA 1500, UB 92, ADA)
- No specific forms for adjustments or special claims

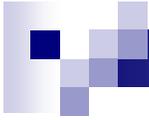
- Submit Electronic Batch Claims

- EMC Claim Format
- HIPAA 837

- Submit Online Electronic Claims*

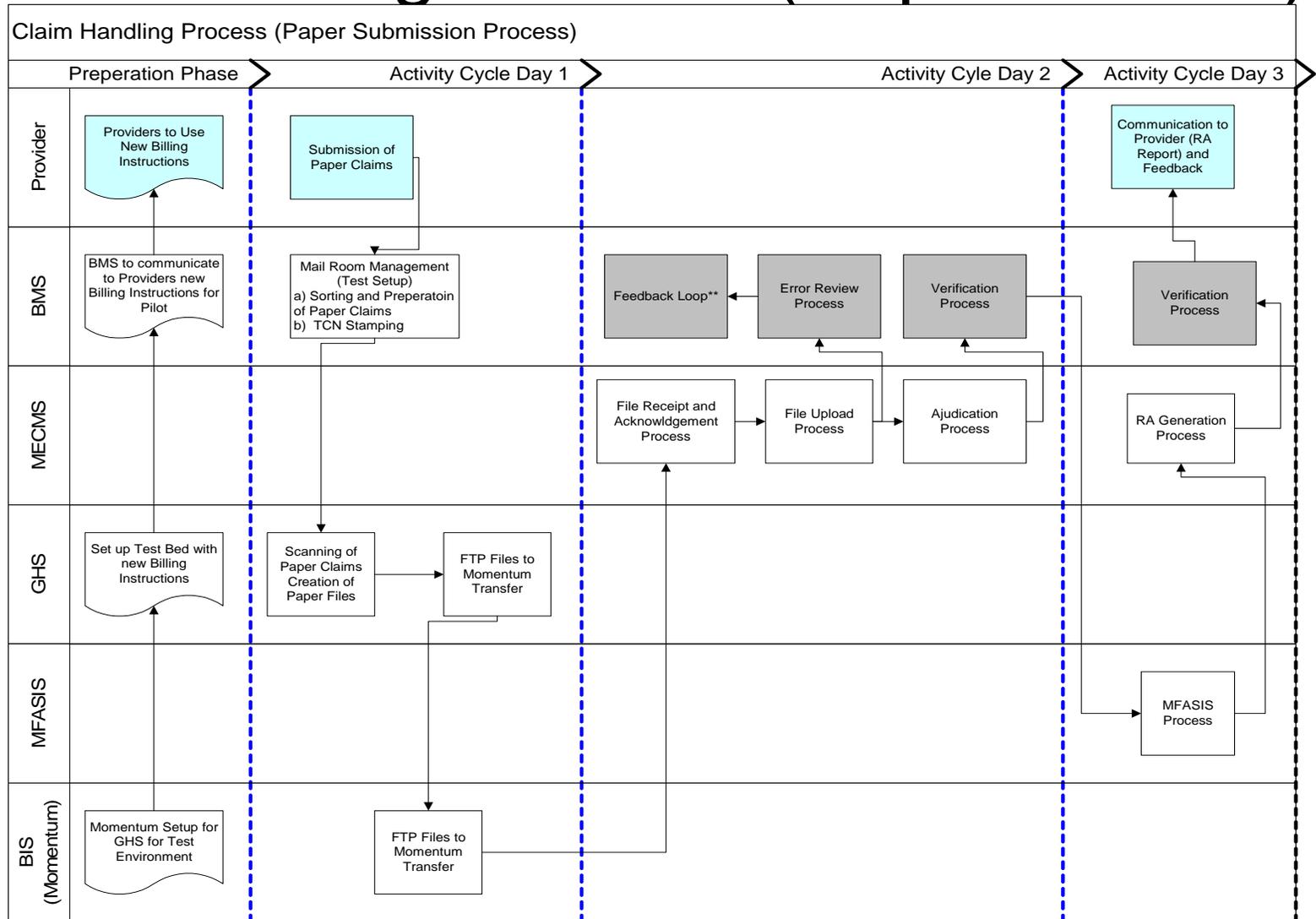
- Direct Data Entry
- Upload Via MECMS website

* Not being addressed in the pilot phase



Paper Claims Management Process

Pilot Testing Process (Paper Claims)





Role of the Provider (Paper Claims)

- Preparation Phase
 - Review the billing instructions for MECMS system
- Activity Phase
 - Submission Activity
 - Ensure sample claims are submitted using the new billing instructions
 - Claims marked for Pilot should be sent in an envelope marked on the front of the envelope as 'PILOT TEST'
 - Dual Submission
 - Submit your regular claims with existing billing instructions
 - Submit the same claims updated in accordance with the new billing instructions
 - Review and Feedback Activity
 - Review the Paper RA generated by the MECMS system for accuracy
 - Submit your feedback via email to bms.pilot@maine.gov



EMC Claims Management Process



EMC Claims Submission

- Providers are already using the EMC process to submit batch electronic claims
- Present mode of claim submission will continue to be available to all providers until otherwise notified by the State



Current EMC Claims Submission Process

- Dial Up to connect to State Network
 - ZModem
 - YModem
 - Secure FTP*
- Submit Files
- Receive confirmation of successful file transfer
- Processing of submitted files overnight
- Acknowledgment files received via email attachment

*Secure FTP is the recommended option



New EMC Claims Submission Process

- Dial Up to connect to State Network
 - ZModem
 - YModem
 - Secure FTP*
- Submit Files
- Receive confirmation of successful file transfer
- Processing of submitted files every 45-60 minutes to generate acknowledgments
- Acknowledgment files sent via email
- Provider can access the acknowledgment file using the Secure FTP

* Secure FTP is the recommended option



Acknowledgment and Feedback

- Details about feedback
 - Rules for File Rejection
 - Error details available as a document
 - Notification for File Rejection
 - Error Report generated and sent as an email attachment
- Do Include and test both
 - Good File
 - Bad File



What has changed in new system : for EMC

- Claims Submission

- Same File Format and Layout
- Similar Submission Process
- Procedure Codes

- However

- Need to use latest place of service code set
- Refer to the new billing instructions for specific details*
- ONE CHANGE** File Naming Convention

* The new billing instructions are available



File Naming Convention

- ~~Current EMC File Naming Convention~~

- ~~□ The name of the file must be EMC.DAT~~

- MECMS EMC File Naming Convention

- The name of the file must be
[PRVDRID][E].DAT

- Example a Provider with ID 999888000 would submit an EMC Claim

- **999888000E.DAT**



File Content and Format

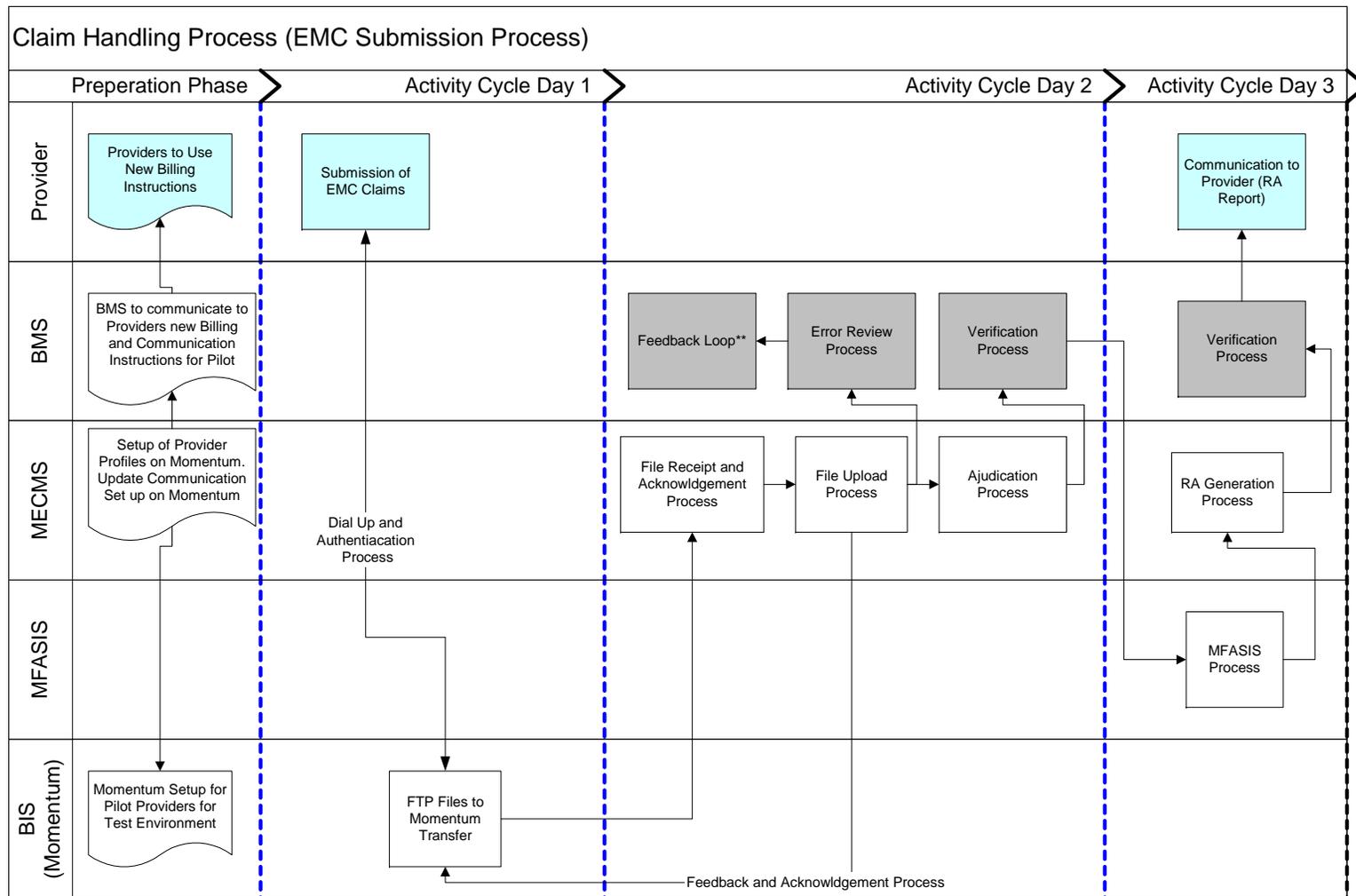
■ Current System

- The first record of the data file must be the :READ record (see *:READ Record Layout* page)
- Userid and Password must appear in column 18 on the :READ card. Example: userid = hf9999z
Password = mstjohn mnemonic = stjo would read
:READ STJO01 TST HF9999ZMSTJOHN

■ New MECMS System

- Do not need the :READ record
- Don't have to worry if you send it in the File, the system ignores it.

Pilot Testing Process (EMC Claims)



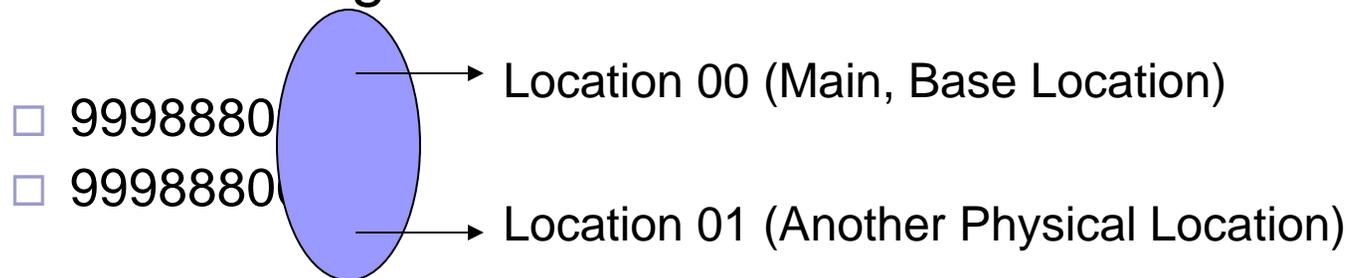


Role of the Provider (EMC Claims)

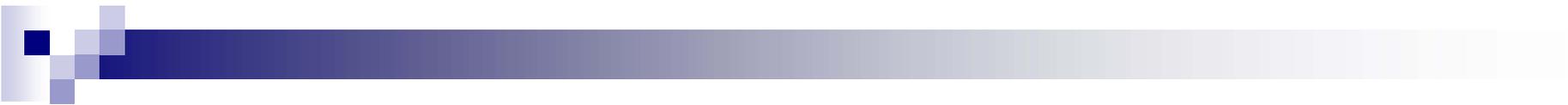
- Preparation Phase
 - Review the billing instructions for MECMS system
 - Ensure batch files generated using the file naming convention
- Activity Phase
 - Submission Activity
 - Ensure batch files are submitted over one of three modes of electronic submission
 - Dual Submission-
 - Submit your regular claims with existing billing instructions and file name
 - Submit the same claims updated in accordance with the new billing instructions and the new file naming format
 - Submit a bad file to verify the rejection process
 - Review and Feedback Activity
 - Review the Acknowledgment and Feedback file
 - Review the process of receiving the RA file using Secure FTP
 - Review the Remittance Advice for 835 content
 - Submit your feedback via email to bms.pilot@maine.gov

Note on Provider Numbers

- New provider numbers are being issued. They will not be used during the Pilot Testing
- Concept of tracking the different locations of the same provider using the location number



- Now you can submit claims for both these locations using a single claims submission file
- A Billing Agency/Clearinghouse can submit claims for more than one provider in a single claims submission file



Billing Agencies/Clearinghouses

- Billing Agencies/Clearinghouses need to register/enroll in the MECMS system to enable claims submission
- Agencies/Clearinghouses are issued a specific number by the MECMS system
- Provider identifies the Billing Agency/Clearinghouse that is allowed to bill on its behalf through the enrollment process
- The system maintains the status of the relationship between the provider and the Billing Agency/Clearinghouse. The system also maintains the period for which the relationship is active
- A separate acknowledgement file is generated for each billing provider in the file



HIPAA Claims Management Process

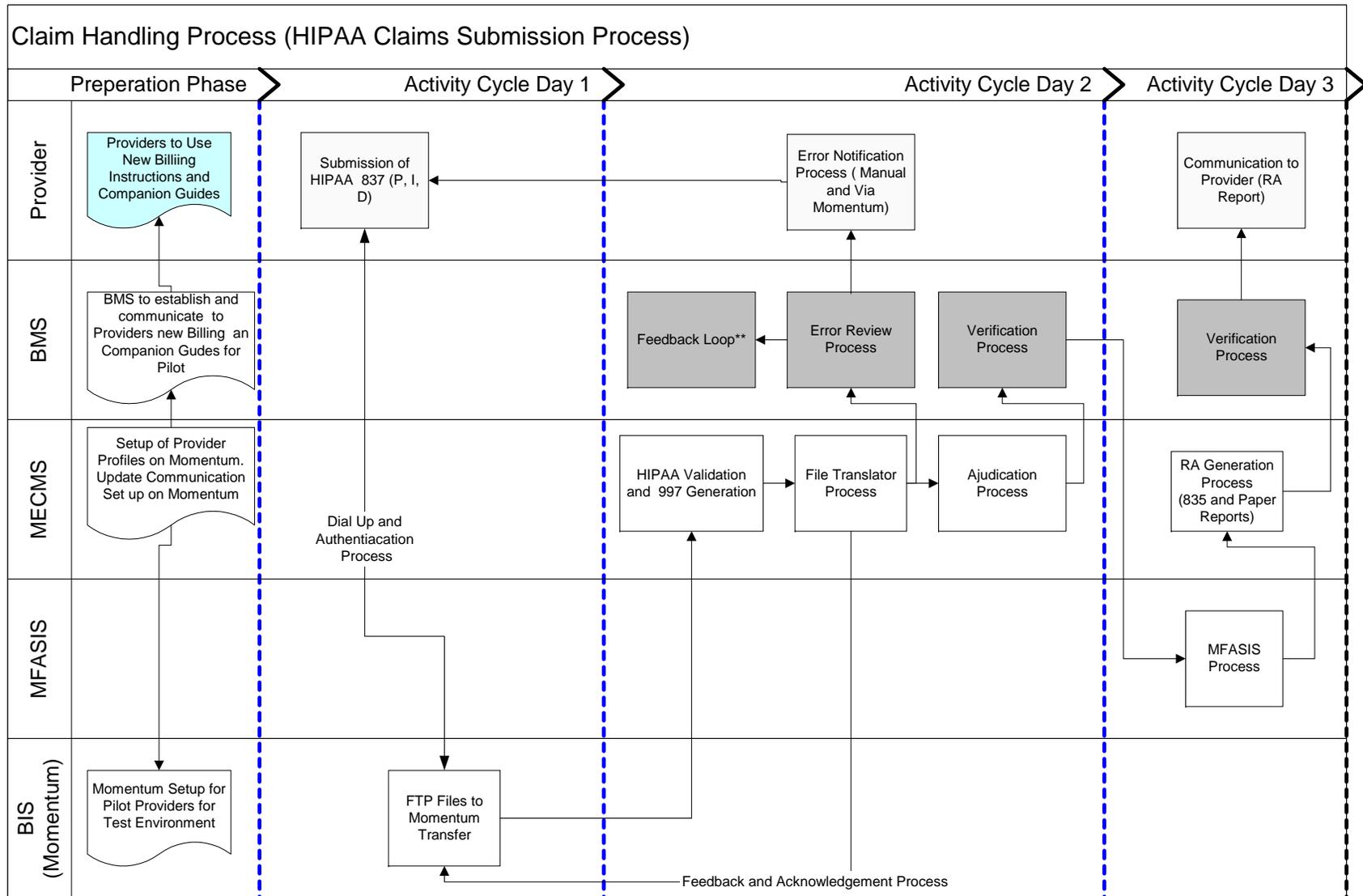


HIPAA Claims Submission

- Before you can submit claims in HIPAA format in production with the MECMS system, you must first run a test process*
- Providers must adhere to the companion guides established by State of Maine
- Providers can migrate to a specific transaction in production
- For example a provider can submit HIPAA 837 (P) in production but may be still working on HIPAA 837 (I) in test mode

* Provider would need to be validated and approved by transaction type

Pilot Testing Process (HIPAA Claims)





HIPAA Claims Submission Process

- Providers can use the current batch file submission process that they use for EMC for HIPAA files as well
 - Secure FTP
 - ZModem
 - YModem
- Providers can submit batch files over the MECMS secure web site**
- HIPAA File Naming Convention when submitting batch file is [PRVDRID][H].DAT
 - Example a Provider with ID 999888000 would submit an HIPAA Claim
 - **999888000H.DAT**

** Not available for the pilot phase



Role of the Provider (HIPAA Claims)

■ Preparation Phase

- Review the billing instructions and the companion guides for MECMS system
- Ensure batch files generated using the file naming convention
- Ensure that the HIPAA 837 transactions are valid for level 1 and level 2 edits

■ Activity Phase

- Submission Activity
 - Ensure batch files are submitted over one of three modes of electronic submission
 - Submit a bad file to verify the rejection process at the 997 Level
- Review and Feedback Activity
 - Review the 997 feedback file
 - Review the Error Report for Companion Guide level errors
 - Review the process of receiving the RA File using Secure FTP/Z Modem
 - Review the Remittance Advice for 835 content
 - Submit your feedback via email to bms.pilot@maine.gov



Remittance Advice Details

- Adheres to the 835 data content specifications
- New Layout for the Paper RA
 - Summary Page
 - Detail Page
 - Legend Page

Summary Page

Franklin Anesthesia Assoc
 Po Box 88
 Lewiston, ME 04243-0088



MaineCare
 Remittance Statement
 Prepared Date: 11/17/2004
 RA Date: 11/16/2004

RA Number: 75001244

Check / Trace #: 2429900003

Check Date: 10/25/2004

Check Amount: \$18.68

Payment Method: Check

Claims Summary

Billing Provider	Category	Total Billed Units	Total Billed Amount	Total Allowed Amount	Total TPL Amount	Total Patient Resp Amount	Total Paid
110240000	Adjustment	10	\$1,240.00	\$15.55	\$0.00	\$0.00	\$15.55

Provider Adjustments:

Billing Provider	Code	Source	Code Description	Original Balance Amount	Remaining Balance Amount	Adjustment Amount
110240000	NONE	NONE	NONE	\$0.00	\$0.00	\$0.00

Detail Page

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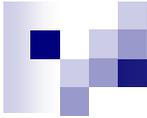


MaineCare
 Remittance Statement
 Prepared Date: 11/17/2004
 RA Date: 11/16/2004
 Page 1

Category: Adjustment RA Number: 75001244

Check / Trace #: 2429900003 Check Date: 10/25/2004

Billing Provider	Member MaineCare ID Med. Record#, Patient Acct#	TCN / Claim Type	Line #	Rendering Provider	Service Date(s)	Rev / Proc / Mod	Total Units	Total Billed Amount	Total Allowed Amount	Total TPL Amount	Total Patient Resp. Amount	Total Paid Amount	Remark Codes	Adjustments
110240000	Trask, Loraine 41717141A FRA2944	102003072000002000 1-Professional/Claim	1		07/25/2002- 07/25/2002	58671 AA	6	\$620.00	\$82.80	\$0.00	\$0.00	\$82.80		42- \$537.20
Document Total:							6	\$620.00	\$82.80	\$0.00	\$0.00	\$82.80		
	Trask, Loraine 41717141A FRA2944	222004292000008000 1-Professional/Claim	1	325610001	07/25/2002- 07/25/2002	58671 AA	4	\$620.00	-\$66.24	\$0.00	\$0.00	-\$66.24		42- \$686.24
Document Total:							4	\$620.00	-\$66.24	\$0.00	\$0.00	-\$66.24		
Billing Provider Total:							10	\$1,240.00	\$16.56	\$0.00	\$0.00	\$16.56		
Category Total:							10	\$1,240.00	\$16.56	\$0.00	\$0.00	\$16.56		



Legend Page

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MaineCare
Remittance Statement
Prepared Date: 11/17/2004
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RA Number: 75001244

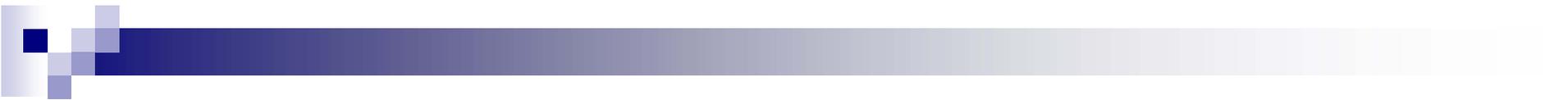
Check / Trace #: 2429900003 Check Date: 10/25/2004

Remark Codes	Adjustments
	42: Charges exceed our fee schedule or maximum allowable amount.



You have questions: We are here to help!

- Use the BMS web site (www.state.me.us/bms)
 - Click on MECMS Pilot Link
www.state.me.us/bms/mecmspilot.htm
 - Look for Frequently Asked Questions
 - Post questions and inquiries
 - FAQ's shall be updated weekly
- Email us with your questions and inquiries
 - Address is bms.pilot@maine.gov
- Contact the Provider Inquiry Desk
 - 1 800 321 557 Option 9



Frequently Asked Questions

- Question:

- When can I start submitting the test files

- Answer

- State shall be sending an official notification via email to all the registered participants about the actual day. Tentatively, the process shall start on 12/20/2004



Frequently Asked Questions

- Question:

- Where do I find the latest billing instructions

- Answer

- The most recent billing instructions are posted on the BMS web site (www.state.me.us/bms/billing_manuals.htm)
- Copies of the billing instructions are available today



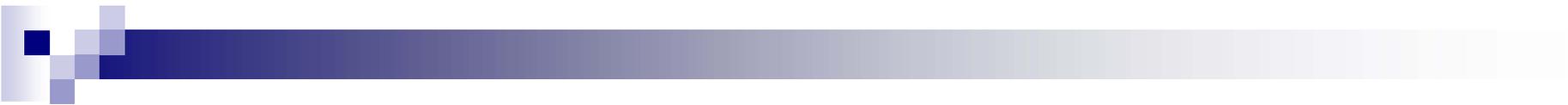
Frequently Asked Questions

- Question:

- Where do I find the HIPAA Companion Guides. If I seek some clarification who do I contact for additional information

- Answer

- The companion guides are available on the following URL
 - <http://www.maine.gov/dhhs/emc/emc-hipaa-guidelines.htm>
- Please send your request for additional information to the following email address
 - bms.pilot@maine.gov
- Please put in your questions on the BMS web site under the MECMS Pilot Link
 - www.state.me.us/bms/mecmspilot.htm



Summary

- Require to do dual submission of claims and files
- We need to use
 - Latest billing instructions (EMC and Paper)
 - Correct file naming conventions (EMC) and
 - Companion Guides (HIPAA)
- Thanks for your Co-operation and time today